

SUPPLEMENT ATTACHED

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 152

Registered No. 385

1. PLACE OF BIRTH

County GilaState Arizona

District or Township

or Village

City MiamiNo. 12 Porto Pico Canon St.

Ward

2. Full name of child Felicita Campos

If birth occurred in a hospital or institution, give its NAME instead of street and number

If child is not yet named, make supplemental report, as directed.

3. Sex of Child

To be answered ONLY
in event of plural
births.

4. Twin, triplet or other

6. Legitimate?

7. Date

of birth

Month Day Year

Female5. No., in order of birth 2ndyesAug. 23-1928

8.

FATHER

Full name

Jose Campos

9. Residence

(Usual place of abode)

If non-resident, give place and state.

Miami,
Arizona.

10. Color or race

Mex.11. Age at last birthday 32 (Years)

12. Birthplace (city or place)

(State or country)

Jalis co,
Mex.

13. Occupation

Nature of industry

Track man
Mining.

14.

MOTHER

Full maiden name

Mercedes Hernandez

15. Residence

(Usual place of abode)

If non-resident, give place and state.

Miami,
Arizona.

16. Color or race

Mex.17. Age at last birthday 32 (Years)

18. Birthplace (city or place)

(State or country)

Jalis co
Mex.

19. Occupation

Nature of industry

HousewifeNumber of children of this mother 9Age as of time of birth of child herein
ified and including this child).(a) Born alive and now living 9

(b) Born alive but now dead

(c) Stillborn

21. Were precautions taken against oph-
thalmia neonatorum.yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 4:30 A. M. on the date above stated.

(Born alive or stillborn)

Signature

Byril M. Brown M.D.Physician

(Physician or midwife).

Given name added from
a supplemental report

Address

Miami, Arizona

Month, day, year

Filed

Sept 12, 1928

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Registrar.

Registrar.

632-823-489

WRITE PL. ONLY WITH UNFADING INK—THIS IS A PERMANENT REC.
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.